

Appendix F.8

Sample Letter To Physician Regarding Health Care Plan

DATE

Dear Dr. _____;

The _____ school district has been asked to provide specialized health care for your patient, _____.

If it is essential that this procedure be provided during school hours, we will need your written order on file.

Attached is a tentative health care plan for this student, including a description of a standardized procedure. Please review these materials, make written comments and provide the requested information to guide us in providing a safe school environment. We will incorporate your comments and make adjustments in the procedure as directed. Services will begin when we have the necessary orders and adequately trained personnel in place.

Please feel free to contact _____, who is assuming the responsibility for the management of this student's health care in our school. She (he) can be reached at _____ (add best time to call, if this is pertinent).

Sincerely,